## 12030944915

## STATEMENT OF

RECEIVED

FORM 1						AM 9: 34
NAME OF COMMITTEE (in	n full)	(Check if is change		Example:If typing, ty over the lines.	- TEOTIM	
ALABAMA	SEN	TORIAL	CAUC	CUS		
	<del>                                     </del>		<u> </u>		<u> </u>	
ADDRESS (number a	and street)	P. O. BO	X <sub>8</sub> 39	) <b>4</b>	<del></del>	
(Check if address is changed)		DELRAY	BEA	CH	, FL	33482
			c	SITY	STATE	ZIP CODE
COMMITTEE'S E-MA	address	· · · · · · · · · · · · · · · · · · ·	_	nail address) SenatorialCa	ucuses@y	/ahoo.com
COMMITTEE'S WEE	B PAGE ADE	PRESS (URL)				
(Check if is change						
2. DATE 1	) <sup>™</sup> ′ <b>2</b> 9	° ′ 2012	¥			
3. FEC IDENTIFICATION NUMBER C						
4. IS THIS STATE	MENT 🗵	NEW (N)	OR	AMENDED	(A)	
certify that   have	examined th	is Statement and t	o the best	of my knowledge and b	pelief it is true, corre	ect and complete.
Type or Print Name	of Treasurer	RICHA	RD KE	VINSTON	to the second se	· · · · · · · · · · · · · · · · · · ·
Signature of Treasur	er	Kurft)			Date <b>1</b>	0°′29°′2012°′
NOTE: Submission of				nay subject the person si		to the penalties of 2 U.S.C. §437g.
Office Use Only				For further inform Federal Election C Toll Free 800-424-5	ommission 9530	FEC FORM 1 (Revised 02/2009)